

**Intent to Submit Proposal for  
Improving Teacher Quality  
Higher Education Grant Program  
FY 2002-03**

Name

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Institution

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**Partnership Representatives:**

| Name | College/Department/LEA |
|------|------------------------|
|      |                        |
|      |                        |
|      |                        |
|      |                        |

1. Grade Span; check those that apply to your application:

☐ Elementary   ☐ Middle School   ☐ High School

2. Core Subject Area(s):

- |   |  |
|---|--|
| <input type="checkbox"/> English                  | <input type="checkbox"/> Civics and Government |
| <input type="checkbox"/> Reading or Language Arts | <input type="checkbox"/> Economics             |
| <input type="checkbox"/> Mathematics              | <input type="checkbox"/> Arts                  |
| <input type="checkbox"/> Science                  | <input type="checkbox"/> History               |
| <input type="checkbox"/> Foreign Languages        | <input type="checkbox"/> Geography             |

3. Other Professional Development (i.e., mentoring, paraprofessionals, etc):

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**Please return this form by October 7, 2002, to:**

Dr. Nancy Healy  
Improving Teacher Quality Program  
S.C. Commission on Higher Education  
1333 Main St., Suite 200  
Columbia, SC 29201